
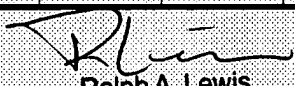


<b>Issue Classification</b> 	Application No.	Applicant(s)	
	09/466,947	PETERSON, DALE D.	
	Examiner	Art Unit	
	Ralph A. Lewis	3732	

ISSUE CLASSIFICATION									
ORIGINAL				CROSS REFERENCE(S)					
CLASS		SUBCLASS		CLASS		SUBCLASS (ONE SUBCLASS PER BLOCK)			
433		90		433		23			
INTERNATIONAL CLASSIFICATION				219		121.68			
A 61 C	5104			264		400			
A 61 C	3100								
B 29 C	35108								
	1								
	1								

(Assistant Examiner) (Date)		 Ralph A. Lewis Primary Examiner AU 3732 (Primary Examiner) (Date)	Total Claims Allowed: 26	
(Legal Instruments Examiner) (Date)			O.G. Print Claim(s) 1	O.G. Print Fig. 1, 2

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original
1	1	26	31		91		121		181
2	2	21	32		92		122		182
3	3		33		93		123		183
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9	7		37		97		127		187
10	8		38		98		128		188
	9		39		99		129		189
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23	28		58		118		148		208
24	29		59		119		149		209
25	30		60		120		150		210

SERIAL NUMBER 09/466,947	FILING DATE 12/20/99	CLASS 433	GROUP ART UNIT 3732	ATTORNEY DOCKET NO. 55288USA1A
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APPLICANT

DALE D. PETERSON, MAPLEWOOD, MN.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

None PL

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

None PL

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED

None PL

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 01/29/00

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MN	SHEETS DRAWING 1	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 2
Verified and Acknowledged Examiner's Initials _____ Initials _____					

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TITLE

ARTICLE WITH LASER ENGRAVED IDENTIFICATION MARK

FILING FEE RECEIVED  \$958	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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1-894 U.S. PTO  
09/466947



433	90
Class	Subclass
ISSUE CLASSIFICATION	

PATENT NUMBER
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U.S. UTILITY Patent Application

O.I.P.E. SCANNED <i>CTHLY</i> O.A. <i>OK</i>	PATENT DATE
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CLASS <i>433</i>	SUBCLASS <i>90</i>	ART UNIT <i>3732</i>	EXAMINER <i>LEWIS</i>
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TITLE OF INVENTION:

APPLICANT(S):

BEST AVAILABLE COPY

ISSUING CLASSIFICATION							
ORIGINAL		CROSS REFERENCE(S)					
CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)				
<i>433</i>	<i>90</i>	<i>433</i>	<i>23</i>				
INTERNATIONAL CLASSIFICATION		<i>219</i>	<i>12.68</i>				
<i>A61C</i>	<i>5104</i>	<i>264</i>	<i>4000</i>	<i>400</i>			
<i>A61C</i>	<i>3100</i>						
<i>B29C</i>	<i>35108</i>						

☐ Continued on Issue Slip Inside File Jacket

<input type="checkbox"/> <b>TERMINAL DISCLAIMER</b>	<b>DRAWINGS</b>			<b>CLAIMS ALLOWED</b>	
	Sheets Drwg. <i>1</i>	Figs. Drwg. <i>2</i>	Print Fig. <i>1/2</i>	Total Claims <i>20</i>	Print Claim for O.G. <i>1</i>
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.	_____ (Assistant Examiner) (Date)			<b>NOTICE OF ALLOWANCE MAILED</b>	
<input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S. Patent. No. _____	<i>Ralph A. Lewis</i> Primary Examiner <i>AK3732</i> (Primary Examiner) (Date)			<b>ISSUE FEE</b>	
<input type="checkbox"/> The terminal _____ months of this patent have been disclaimed.	_____ (Legal Instruments Examiner) (Date)			<b>ISSUE BATCH NUMBER</b>	

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